


ATTACH A SMALL PHOTOGRAPH <b><u>EXACTLY</u></b> 1½" X 2¼" THAT HAS BEEN TAKEN WITHIN THE LAST 12 MONTHS OF THE DATE OF THIS APPLICATION SHOWING A FULL FACE VIEW COVERING HALF OF THE WIDTH OF THIS SPACE WITH <b><u>NO HEAD COVERING, CAP OR HAT.</u></b>	<b>FOR BOARD USE ONLY</b>		<div style="text-align: center;">STATE OF TENNESSEE</div>  <div style="text-align: center;"> <b>BOARD OF EXAMINERS FOR LAND SURVEYORS</b>  500 JAMES ROBERTSON PARKWAY  NASHVILLE, TN 37243-1146  615-741-3611  <a href="http://WWW.TN.GOV/COMMERCE/BOARDS/SURVEYORS">WWW.TN.GOV/COMMERCE/BOARDS/SURVEYORS</a> </div>
	DATE RECEIVED		
	FILE NUMBER		
	TRANSACTION NUMBER		

### Application for *Professional Land Surveyor-in-Training*

**THIS IS NOT AN APPLICATION FOR REGISTRATION OR LICENSING AS A PROFESSIONAL LAND SURVEYOR AND ANY DESIGNATION OR RECOGNITION BY THE BOARD WILL NOT, IN ANY WAY, OR DEGREE ENTITLE THE APPLICANT TO PRACTICE OR OFFER TO PRACTICE LAND SURVEYING. THIS APPLICATION IS PROVIDED BY BOARD POLICY TO ALLOW THOSE APPLICANTS THAT QUALIFY UNDER TCA 62-18-109(A)(i), (B)(i) OR (C)(i) TO TAKE THE NCEES EXAMINATION, FUNDAMENTALS OF LAND SURVEYING (FS), AND BE ACKNOWLEDGED AS PROFESSIONAL-LAND SURVEYOR-IN-TRAINING (PLSIT).**

**IMPORTANT – PLEASE READ AND UNDERSTAND THIS FORM AND THE TENNESSEE LAWS BEFORE YOU COMPLETE THIS APPLICATION. ALL INFORMATION REQUESTED ON THIS FORM MUST BE TYPEWRITTEN OR LEGIBLY PRINTED AND ALL QUESTIONS MUST BE ANSWERED. RETAIN A COPY FOR YOUR FILES**

**APPLICATION MUST BE ACCOMPANIED WITH A PAYMENT OF \$25.00 MADE PAYABLE TO THE TENNESSEE BOARD OF EXAMINERS FOR LAND SURVEYORS AND MAILED TO 500 JAMES ROBERTSON PARKWAY, NASHVILLE, TN 37243-1146. *This application, along with a \$25.00 application fee, education verification forms, and transcripts must be received in the board office before the application can be reviewed.* PLEASE ALLOW 5-7 BUSINESS DAYS TO ENSURE ADEQUATE DELIVERY TIME OF THIS APPLICATION BEFORE THE DEADLINE DATE.**

1. GENERAL INFORMATION: (Circle b. or c. to indicate your preference for address of record with this Board.)

a. Name in full \_\_\_\_\_ SSN \_\_\_\_\_  

First
Middle
Last

b. Residence address \_\_\_\_\_ ( ) \_\_\_\_\_  

Street No.
Telephone No.

City County State/Zip

c. Business name and address \_\_\_\_\_ ( ) \_\_\_\_\_  

Name
Telephone No.

Street No City State/Zip Position

E-mail Address \_\_\_\_\_

d. Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

e. Can you speak and understand the English language? \_\_\_\_\_

f. Do you have a disability which may require special accommodations in taking an examination? \_\_\_\_\_

- g. Have you ever filed an application with this Board? \_\_\_\_\_ If yes, type of application \_\_\_\_\_  
When? \_\_\_\_\_
- h. Has your name changed since birth? \_\_\_\_\_ Was your previous application made with the  
same name? \_\_\_\_\_
- i. Have you ever been disciplined by any state licensing authority? \_\_\_\_\_  
If so, please explain \_\_\_\_\_
- j. Have you ever been denied registration or had your license suspended or revoked? \_\_\_\_\_  
If so, name state and year \_\_\_\_\_
- k. Have you ever been convicted of a felony? \_\_\_\_\_ If yes, please attach a separate  
statement describing the circumstances.

2. **EDUCATION RECORD** – You must submit **CERTIFIED** transcripts with your application. You must highlight or list on separate sheet attached to the transcript all surveying related courses you are claiming for credit under the provisions of TCA 62-18-109 for eligibility categories B or C.

NAME AND COMPLETE ADDRESS OF COLLEGE OR UNIVERSITY	YEARS ATTENDED		MAJOR	DATE OF GRADUATION	DEGREE RECEIVED
	From	To			

I hereby make application for designation as a Professional Land Surveyor-in-Training (PLSIT) to be acknowledged by the Tennessee State Board of Examiners for Land Surveyors and that I am now committed to and endeavor to complete the additional requirements to become a registered and licensed professional land surveyor in the State of Tennessee. I fully understand that the designation as PLSIT does not entitle me to practice land surveying to any extent without being under the direct supervision and responsible charge of a Tennessee licensed land surveyor.

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Signature of Applicant

Subscribed and sworn to before me, on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

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Notary Public

(Seal)

My commission expires \_\_\_\_\_, 20 \_\_\_\_\_.